

THIS CANDIDATE
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

RECEIVED
OCT 12 PM 4:26

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

a) Candidate Name:

TONY FISHER

b) Committee Name:

FRIENDS of TONY FISHER

c) Mailing Address:

285 Ohina Place

Kihikihi 96753

d) Phone (Bus):

344-3501

(Res)

874-1805

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary

☐ Amended

☐ First

☐ Third

☐ Second

☐ Fourth

☒ 2nd Preliminary Primary

☐ Short Form¹

☒ Final Primary

☐ Preliminary General

☐ Final Election Period

☐ Supplemental

REPORTING PERIOD

9-9-06 through

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		1837.54
2. Cash on Hand at the Beginning of this Reporting Period.....	1837.54	
3. Total Receipts (From Line 15).....	2802.68	5912.68
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	4640.22	5912.68
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	3530.02	5017.48
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	1110.20	295.20
7. Total Loans at the Closing of this Reporting Period.....	2322.68	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	-	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	-	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	1110.20	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.


Candidate Signature

10/2/06
Date


Treasurer Signature

Oct. 12, 06
Date

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	280	565	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	200	3025	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	480	3590	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	—	—	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	—	—	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	—	—	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	—	—	12
13. Public Funds and Other Receipts.....	—	—	13
14. Loans.....	2322.68	2322.68	14
15. Total Receipts (Add Lines 12 through 14).....	2802.68	5912.68	15
DISBURSEMENTS			
16. Expenditures.....	3530.02	5617.48	16
17. Loans Repaid or Forgiven.....	—	—	17
18. Unpaid Expenditures Paid or Forgiven.....	—	—	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	3530.02	5617.48	19
20. Unpaid Expenditures.....			20
21. Total Disbursements (Add Lines 19 and 20).....	3530.02	5617.48	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES
- ☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

TONY FISHER FRIENDS of TONY FISHER

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9-14-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Vincent J. DePesa 6070 Irwindale Ave AD Irwindale, Ca. 91706		200.00	1657.46
9-14-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Peter H. Tag 312 Pihikoa Rd. Kula, HI 96790		100.00	1757.46
9-14-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Lynn L. Story P.O. Box 1022 Paunohu, HI 96784		100.00	1857.46
9-06-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION W. Brown 777 S. Kihai #116 Kihai, HI 96753		10.00	1867.46
9-06-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Maggie Daniels 307 A Marini Pl. Kihai HI 96753		20.00	1887.46
9-06-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION John Seelley 1032 S. Kihai Kihai, HI 96753		25.00	1912.46

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

Form CC-5(A) (Rev.

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

TONY FISHER FRIENDS & TONY FISHER

PAGE

2

OF

2

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9-06-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Wilhelm K. Weher 216 Waiholi Way # 10 Lahaina, HI 96761		25.00	1967.46
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

4786

Form CC-5(A) (Rev. 11/01)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

TONY FISHER FRIENDS of TONY FISHER

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8-16-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Verizon Wireless	phone	150.00
8-24-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Wailuku Rapid Print 800 Eha ST. # 26 Wailuku, Hi 96793	Cards	20.59
8-25-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Segin Solutions 375 Nuku Ali Pl. Kilauea, Hi 96753	Segins	437.50
8-25-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Home Depot 100 Pakaula St Kahului, Hi 96732	Staples Staples	17.88
9-7-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Maui Weekly 1993 So. Kilauea Rd Kilauea, Hi 96753	ads	267.71
9-11-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Wailuku Rapid Print 800 Eha St. # 26 Wailuku, Hi 96793	Cards	1,251.14
9-11-06	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Able Mailing Service P.O. Box 260 Paunene, Hi 96784	mailing	1,352.50

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)..... 3497.32

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

TONY FISHER FRIENDS of TONY FISHER

PAGE

OF

2

2

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
<i>9-23-06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>office Max 270 Dairy Rd Kahului, HI 96732</i>	<i>Ticket 4- 2006,</i>	<i>5.20</i>
<i>8-29-06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>American Sav. Bank P.O. Box 2300 Honolulu, HI 96804</i>	<i>check order fee</i>	<i>13.50</i>
<i>8-31-06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>American Sav. Bank P.O. Box 2300 Honolulu, HI 96804</i>	<i>service charge</i>	<i>7.00</i>
<i>9-29-06</i>	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>American Sav Bank P.O. Box 2300 Honolulu, HI 96804</i>	<i>service charge</i>	<i>7.00</i>
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

32.20
~~*32.20*~~

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

3530.02

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**DISPOSITION OF DURABLE ASSETS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

TONY FISHER

DISPOSITION OF ASSETS

The sale of an asset must also be reported as an "Other Receipt" on Schedule C.

DATE OF DISPOSITION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF ENTITY ACQUIRING THE ASSET	DESCRIPTION OF ASSET	SALE PRICE OR FAIR MARKET VALUE OF ASSET	METHOD OF DISPOSITION
	<i>NONE</i>			<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN
				<input type="checkbox"/> SOLD <input type="checkbox"/> DISPOSED <input type="checkbox"/> DONATED <input type="checkbox"/> TRADE-IN

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE C
PUBLIC FUNDS AND OTHER RECEIPTS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

TONY FISHER & FRIENDS of TONY FISHER

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	NONE			

1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....
2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number 13 of the Disclosure Report).....

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

OF

TONY FISHER FRIENDS of Tony Fisher

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF LENDER NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAYED OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
DATE OF LOAN	PURPOSE OF LOAN				
<input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER	NANCY LEE FISHER 285 OHIA PL K. Hail HI 96753 FINANCE EXPENDITURES	0	2322.48	0	2322.48
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....	2322.48	2322.48
2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report).....	SAME	
3. TOTAL LOANS REPAYED OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).....	0	
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....	2322.48	

Form CC-5(D) (Rev. 5/95)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE E UNPAID EXPENDITURES CANDIDATE COMMITTEE

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE _____ OF _____

TONY FISHER FRIENDS OF TONY FISHER

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
	<i>None</i>			<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....

2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....

3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....

4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....

Form CC-5(E) (Rev. 5/9)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**ACQUISITION OF DURABLE ASSETS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

TONY FISHER FRIENDS of TONY FISHER

ACQUISITION OF ASSETS

The purchase or lease of an asset must also be reported as an "Expenditure" on Schedule B.

DATE OF ACQUISITION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR DONOR	DESCRIPTION OF ASSET	ACQUISITION COST OR FAIR MARKET VALUE OF ASSET
	NONE		

All Durable Assets must be reported until all assets have been sold or disposed of accordingly.